

**FLINT-GOODRIDGE HOSPITAL**

**Superintendent's  
Report  
1944**



Nineteen forty-four has provided additional evidence that "the hospital never stands still." The war years have shown a steady increase and growth in the total services rendered by Flint-Goodridge Hospital.

	1941	1942	1943	1944
Admissions	2,884	3,011	3,011	3,164
Births				631
Total	2,884	3,011	3,011	3,795
Average Daily Census				89.4

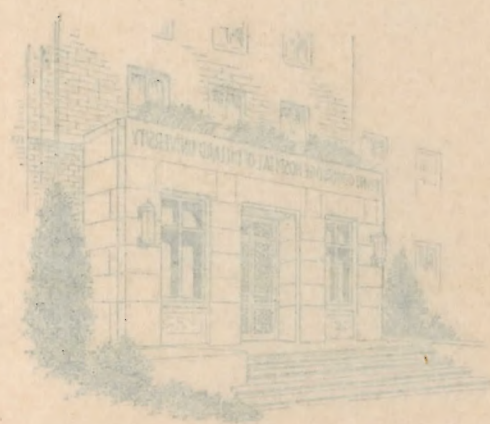


The 89.4 average daily census for the year speaks for itself. The hospital was constructed to care for only eighty-eight patients in order to meet the demands of this increased occupancy, beds, cots, bassinets, and other furnishings have been crowded into spaces here and there as the demand necessitated. How has the hospital managed to serve satisfactorily the community demands for hospital service in the face of a continued tightening employment scarcity is in itself a saga. Tribute is paid, here and now, to those loyal employees who made it possible for us to meet this demand. Flint-Goodridge has been no exception in sharing the general problems of manpower shortages brought on by the war emergency. Many hospital employees not taken by the armed forces, have been lured away to the higher salaries paid by industry and commercial establishments.

"In the health of the public  
lies the wealth of the nation."

—Gladstone





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	<u>1941</u>	<u>1942</u>	<u>1943</u>	<u>1944</u>
Admissions	2,088	2,610	3,075	3,164
Births	<u>348</u>	<u>543</u>	<u>514</u>	<u>631</u>
Total	2,436	3,153	3,589	3,795
Average Daily Census	64.2	76.6	86.3	89.4

The 89.4 average daily number of patients for the year speaks for itself. Inasmuch as the hospital was constructed to care for only eighty-eight patients, in order to meet the demands of this increased occupancy, beds, cribs, bassinets, and other furnishings have been crowded into spaces here and there as the demand necessitated. How we have managed to serve satisfactorily the community demands for hospital service in the face of a continued tightening employment scarcity is in itself a saga. Tribute is paid, here and now, to those loyal employees who made it possible for us to meet this demand. Flint-Goodridge has been no exception in sharing the general problems of manpower shortages brought on by the war emergency. Many hospital employees not taken by the armed forces, have been lured away to the higher salaries paid by industry and commercial establishments.



## THE MEDICAL STAFF

When we speak of hospitals, we must inevitably think of the members of the medical profession. Without them there could be no hospitals. On the other hand, the quality of work done by the members of the medical staff is one of the barometers by which the hospital is judged.

The staff is open—facilities of the hospital are available to any licensed, reputable physician who may bring his patient to Flint-Goodridge for care. Members of the active and consulting staff, composed of fifty-four physicians and four dentists, are appointed annually by the Trustees. In accordance with standards set by the American College of Surgeons, application for staff appointment is made by each man annually. This application is then approved by the Chief of the service and referred to the Medical Advisory Board for recommendation to the Trustees.

In spite of pressure of activity on physicians during this emergency, our staff men continue to devote some of their time to the hospital and the clinics, and perform other helpful acts on the wards. Beginning with April of 1944, three interns—graduates of Meharry Medical College—came as part of the house staff.

Monthly staff meetings have been held, at which scientific papers have been presented. Following are some of the subjects

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631	514	543	348	Births
3,795	3,586	3,153	2,436	Total
89.4	88.3	76.6	64.2	Average Daily Census

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presented during 1944:

- January — Cerebral Accidents  
Drs. Rivers Frederick, R. E. Fullilove, Jr.,  
J. M. Epps, W. R. Adams
- February — The Diagnosis of Intestinal Obstruction  
by X-Ray  
Drs. J. N. Ane and Ernest Cherrie
- March — The Wagner-Dingell-Murray Bill  
Drs. Roy B. Harrison, A. V. Friedrichs,  
Mr. J. L. Procope
- May — The Clinical Significance of the Rh Factor  
Dr. W. N. Segre
- June — Book Review, "Blood and Blood Substitutes"  
by Mudd and Tolheimer  
Dr. J. M. Epps
- October — Nutrition and Vitamin Therapy—a Film  
by Squibb & Co.
- November — Suprapubic Cystotomy preceding Urologic  
Operations  
Dr. R. E. Fullilove, Jr.

The Monthly Reading Club, an organization of some of the men of the active staff, continued its scientific discussions throughout the year. Some of this year's subjects were:

1. A discussion and report of six cases of Sickle Cell Anemia treated at Flint-Goodridge Hospital in the Pediatric Department  
Dr. W. N. Segre
2. Discussion of Water Balance  
Drs. Thelma Y. Coffey, Ernest Carter,  
J. M. Epps
3. Discussion on Thrombophlebitis and Case Reports  
Dr. J. M. Epps
4. The Role of Vitamins in Urology  
Dr. R. E. Fullilove, Jr.
5. Non-engaged Fetal Head at Term  
Dr. W. N. Segre
6. Field of Vision  
Dr. Logan W. Horton
7. Discussion on Syphilis  
Dr. C. H. D. Bowers



# THE MEDICAL STAFF ORGANIZATION

o

C. C. Haydel, President  
R. E. Fullilove, Jr., Vice-President  
Ernest Carter, Secretary

## DEPARTMENT OF PATHOLOGY

## DEPARTMENT OF PSYCHIATRY

## DEPARTMENT OF MEDICINE

Musser, J. H., Consultant	Bowers, C. H. D., Associate Chief
*Archinard, J. J., Consultant	Rhodes, Frederick, Senior Associate
St. Martin, M. E., Consultant	Sherrod, J. A., Senior Associate
DeLaureal, Boni, Consultant	Taylor, Thaddeus, Senior Associate
Jacobs, Sydney, Consultant	Murray, J. H., Junior Associate

## DEPARTMENT OF SURGERY

Cohn, Isidore, Consultant	Duncan, O. W., Senior Associate
Maes, Urban, Consultant	Epps, J. M., Senior Associate
Anderson, G. C., Consultant	Haydel, C. C., Senior Associate
Frederick, Rivers, Chief	Robinson, H. E., Senior Associate
Adams, W. R., Senior Associate	Robinson, P. T., Senior Associate

## DEPARTMENT OF GYNECOLOGY & OBSTETRICS

Miller, H. E., Consultant	Segre, W. N., Senior Associate
*Collins, C. G., Consultant	Sheffield, J. O., Senior Associate
Steiner, M. D., Consultant	Thomas, J. W., Senior Associate
Davidson, N. R., Chief	Vining, R. J., Senior Associate
Carter, Ernest, Sen. Associate	Coker, R. J., Junior Associate
Coffey, T. Y., Senior Associate	Hayes, T. D., Junior Associate
Jimson, E. P., Senior Associate	Jenkins, Henry, Junior Associate
Huggins, H. H., Clinical Assistant	

## DEPARTMENT OF PEDIATRICS

Bloom, C. J., Consultant	Mims, T. H., Senior Associate
Strange, J. E., Junior Consultant	Segre, W. N., Senior Associate

## DEPARTMENT OF UROLOGY

Vickery, E. B., Consultant	Fullilove, R. E., Jr., Sen. Associate
Donasier, J. J., Sen. Associate	Scoggins, H. C., Clinical Assistant

## DEPARTMENT OF OTOLARYNGOLOGY

McComiskey, A. J., Consultant	Horton, L. W., Chief
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## DEPARTMENT OF OPHTHALMOLOGY

Blum, H. N., Consultant	Allgeyer, E. E., Consultant
	Horton, L. W., Chief

\*In the Armed Forces

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Deane, J. B., Consultant	Taylor, Thomas, Senior Associate
Jacobs, Sydney, Consultant	Murray, J. H., Junior Associate

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Maes, Urban, Consultant	Ross, J. W., Senior Associate
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Horton, L. W., Chief	

\*In the Armed Forces

## DEPARTMENT OF X-RAY

Menville, L. J., Consultant	Ané, J. N., Junior Consultant
	Cherrie, Ernest, Senior Associate

## DEPARTMENT OF PATHOLOGY

Friedrichs, A. V., Consultant

## DEPARTMENT OF PSYCHIATRY

Holbrook, C. S., Consultant

## DEPARTMENT OF DERMATOLOGY

\*Kennedy, Barrett, Consultant

## DEPARTMENT OF ANAESTHESIA

Adriani, John, Consultant

## DEPARTMENT OF DENTISTRY

Wahl, J. P., Consultant  
Booker, W. C., Associate

Talbert, G. B., Associate  
Young, A. J., Associate

## THE MEDICAL ADVISORY BOARD

Musser, J. H., Chairman	
Burbridge, L. T.	Jarrett, Lewis E.
Cohn, Isidore	Maes, Urban

## \*In the Armed Forces

Flint-Goodridge continues its interest in the professional development of the Negro doctor. The annual Postgraduate Course during June attracted thirty-six men from six states. Because of the difficulties of travel, and the great demands being made on physicians, our weekly seminars were not held during 1944.

For the future—we look forward to bettering and expanding our activities within the community. With the postwar emphasis on public health, we hope to add impetus to our fight on the three health liabilities of the Negro—tuberculosis, syphilis and maternal mortality. These three horsemen continue to ride roughshod over large segments of the Negro population.



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 Christie, Ernest, Senior Associate  
 And, J. N., Junior Consultant

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FINANCE AND ADMINISTRATION

Sound principles of finance, careful scrutiny of expenditure, farsighted planning and efficient management are as essential to the success of a hospital as they are to that of a private enterprise. Before the end of each year, a general forecast is made of the expected hospital income and expenses for the following year. A budget is then prepared and submitted to the Trustees. After its approval, this budget is used as our guide for the year's financial transactions.

Early hospitals in France and other countries were called "Hotels Dieu"—Hotel of God. Speaking of hospitals as hotels and considering hospital costs, one is reminded of the great difference between the service the ordinary hotel gives its patrons, and that which the sick and injured receive in the "Hotel of God." The hotel guest pays a flat rate which covers only the privilege of occupying a room. In addition, he pays for meals served and any other special service he might desire.

The daily flat rate of the hospital covers a bed, general nursing care day and night, meals brought to the bedside, and various other routine care. Another factor to be considered is that whereas the customers of a hotel or other business pay for services in full, many hospital patients can pay only part, and some none at all. This has always constituted a great financial problem for hospitals.

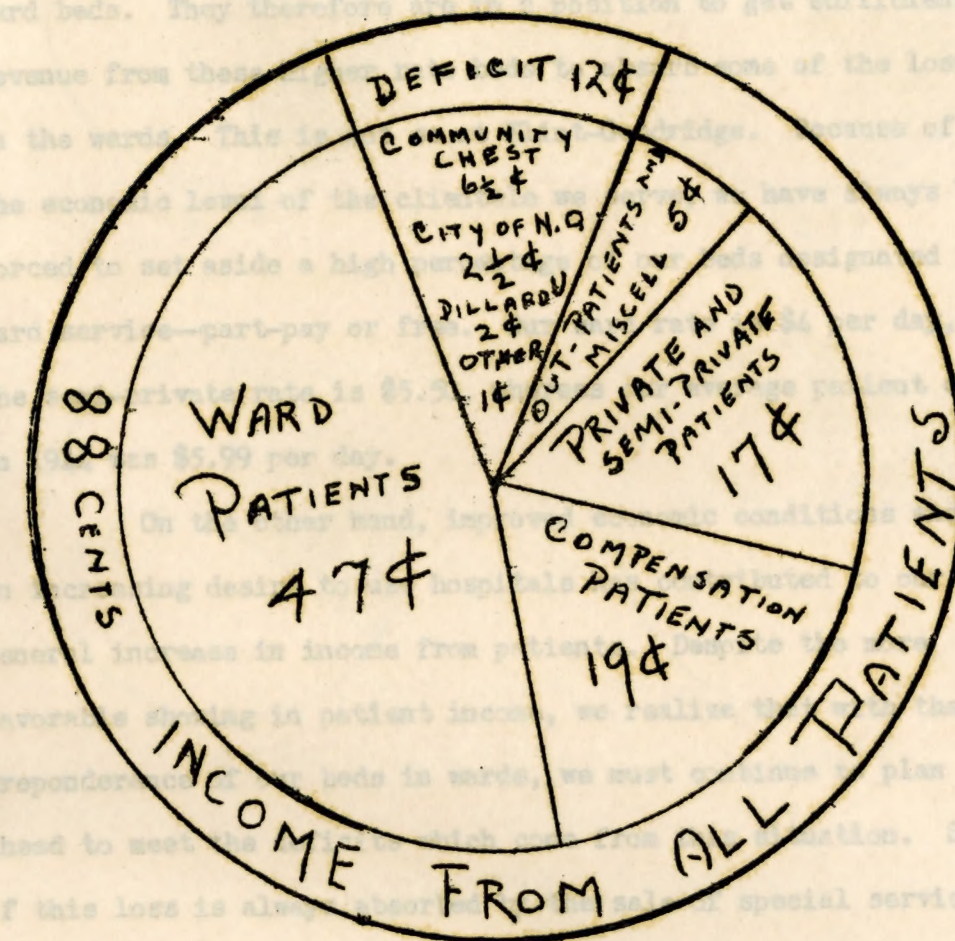


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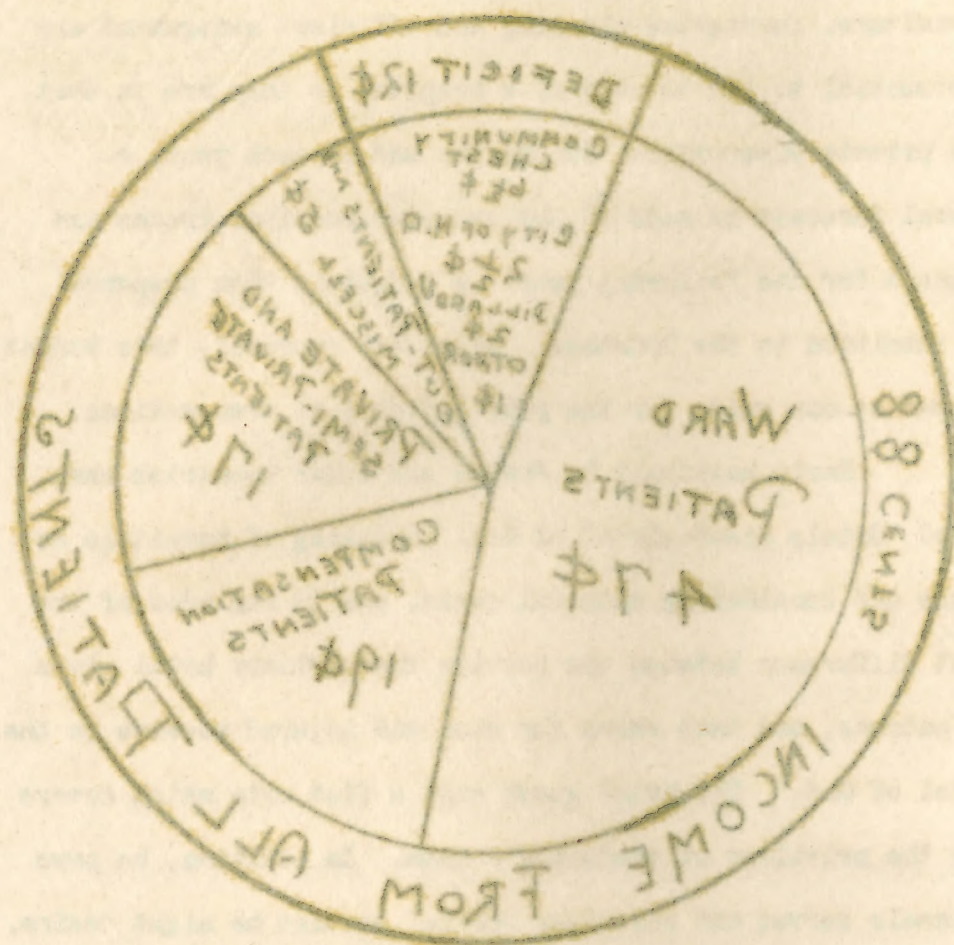


WHERE THE FLINT-GOODRIDGE

DOLLAR

CAME FROM IN 1944





WHERE THE FLINT-GOODRIDGE

DOLLAR

CAME FROM IN 1944

Most voluntary hospitals maintain a higher percentage of private and semi-private rooms than they do of minimum-cost ward beds. They therefore are in a position to get sufficient revenue from these higher rate beds to absorb some of the losses on the wards. This is not so at Flint-Goodridge. Because of the economic level of the clientele we serve, we have always been forced to set aside a high percentage of our beds designated for ward service—part-pay or free. Our ward rate is \$4 per day, and the semi-private rate is \$5.50, whereas our average patient cost in 1944 was \$5.99 per day.

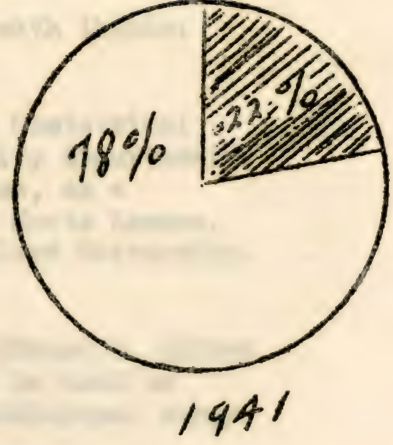
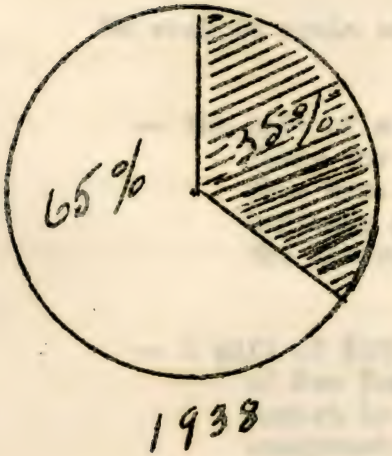
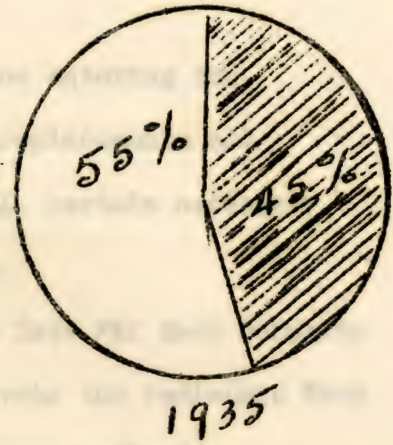
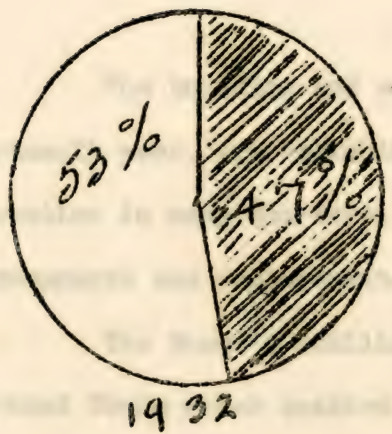
On the other hand, improved economic conditions and an increasing desire to use hospitals has contributed to our general increase in income from patients. Despite the more favorable showing in patient income, we realize that with the preponderance of our beds in wards, we must continue to plan ahead to meet the deficits which come from this situation. Some of this loss is always absorbed by the sale of special services. We must, however, continue to look to our contributors to meet part of this deficit.



We have cooperated with the government Emergency Maternal and Infant Care Program for wives of service men. One hundred seventy-eight wives came to us for confinement during the year. One hundred forty-four patients, members of Hospital Service Association of New Orleans, came to us for care during 1944.

The above charts show the steady increase in percent in income received from patients. In 1932, the first year of occupancy in the new building, patients' earnings represented 53% of total income. This figure has risen each year. In 1944, the patient earnings was 83%, leaving a deficit of only 12% to be covered by contributors.



GROWTH IN INCOME FROM PATIENTS



 PATIENT INCOME  
 DEFICIT

1944

The above charts show the steady increase in percent in income received from patients. In 1932, the first year of occupancy in the new building, patients' earnings represented 53% of total income. This figure has risen each year. In 1944, the patient earnings was 88%, leaving a deficit of only 12% to be covered by contributors.

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We have cooperated with the government Emergency Maternity and Infant Care Program for years of service and have insured seventy-eight ward beds for us for confinement during the year. One hundred forty-four patients, members of Hospital Service Association of New Orleans, came to us for care during 1944.





1931



1932



1933

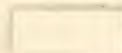


1934



1935

INCOME FROM PATIENTS



DEBIT



The above charts show the steady increase in income received from patients. In 1935, the first year of company in the new building, patients' earnings represented 58% of total income. This figure has risen each year. In 1931, the patients' earnings were 40%, leaving a deficit of only 15% to be covered by contributions.

The building and equipment, now entering the thirteenth year, are beginning to need replacements and renovation in many quarters; during 1944, certain necessary improvements and replacements were made.

The Women's Auxiliary and the Zeta Phi Beta Sorority provided funds which enabled us to renovate the Pediatric Ward and build individual cubicles for our young patients.

We wish to again acknowledge with thanks:

- The gift of a MacEachern Obstetrical Table for our maternity department from Mrs. I. I. Lemann, as a birthday gift to Mr. Monte Lemann, the Treasurer of Dillard University.
- A gift of \$300 from Mr. Edward B. Alford of New York City, to be used to assist in securing additional x-ray equipment.
- A donation of \$12,000 for permanent improvements, from the Fairground Association as part of their annual distribution to various charitable institutions.

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An analysis of the results of our financial transactions will be found on following pages of this report. Also will be found a statistical resume of the services rendered.







WHAT WE RECEIVED IN 1944, 1943 AND  
1941 AND HOW WE USED IT

THIS IS WHAT WE RECEIVED

	<u>1944</u>	<u>1943</u>	<u>1941</u>
VALUE OF CHARGES TO PATIENTS	\$176,234.19	\$146,398.14	\$98,546.58
Less Amount of Free Service	21,647.12	18,140.62	31,337.88
INCOME FROM PATIENTS	\$154,587.07	\$128,257.52	\$67,208.70
OTHER SUNDRY INCOME	5,885.04	11,653.85	4,317.64
CONTRIBUTIONS:			
Community Chest	12,000.00	12,000.00	9,000.00
City of New Orleans	5,000.00	3,000.00	3,000.00
Sundry	927.08	644.19	268.34
Dillard University	4,020.47	5,000.00	9,000.00
TOTAL CONTRIBUTIONS	\$ 21,947.55	\$ 20,644.19	\$21,268.34
TOTAL	\$182,419.66	\$160,555.56	\$92,794.68

THIS IS WHAT WE SPENT

ADMINISTRATION	\$ 14,504.03	\$ 13,264.34	\$10,901.30
FOOD SERVICE	42,730.81	37,889.21	19,173.37
HOUSEKEEPING & PROPERTY	37,679.67	30,515.65	24,465.80
NURSING CARE	41,261.96	32,355.44	16,131.10
OTHER PROFESSIONAL CARE	46,243.19	46,804.26	22,077.43
TOTAL	\$182,419.66	\$160,828.90	\$92,749.00

DECEMBER 31, 1944

THIS IS WHAT WE OWNED

\$1,392.42	CASH IN BANK and on Hand
\$2,778.22	DUE TO US FROM PATIENTS After deducting amount believed to be uncollectible
\$1,212.21	OTHER AMOUNTS DUE US
\$4,720.04	VALUE OF SUPPLIES in storeroom
\$12,846.77	RESTRICTED FUNDS - in Bank Legacies, Special Funds and Gifts for Special Projects
\$20,223.02	TOTAL

THESE WERE OUR OBLIGATIONS

\$10,219.01	DUE TO MERCHANTS For Services and Supplies Purchased during December
\$707.96	DUE UNITED STATES GOVERNMENT For Employees Withholding Taxes
\$825.06	GROUP HOUSING FUND
\$29.32	SOCIAL SERVICE FUND
\$20,223.02	TOTAL



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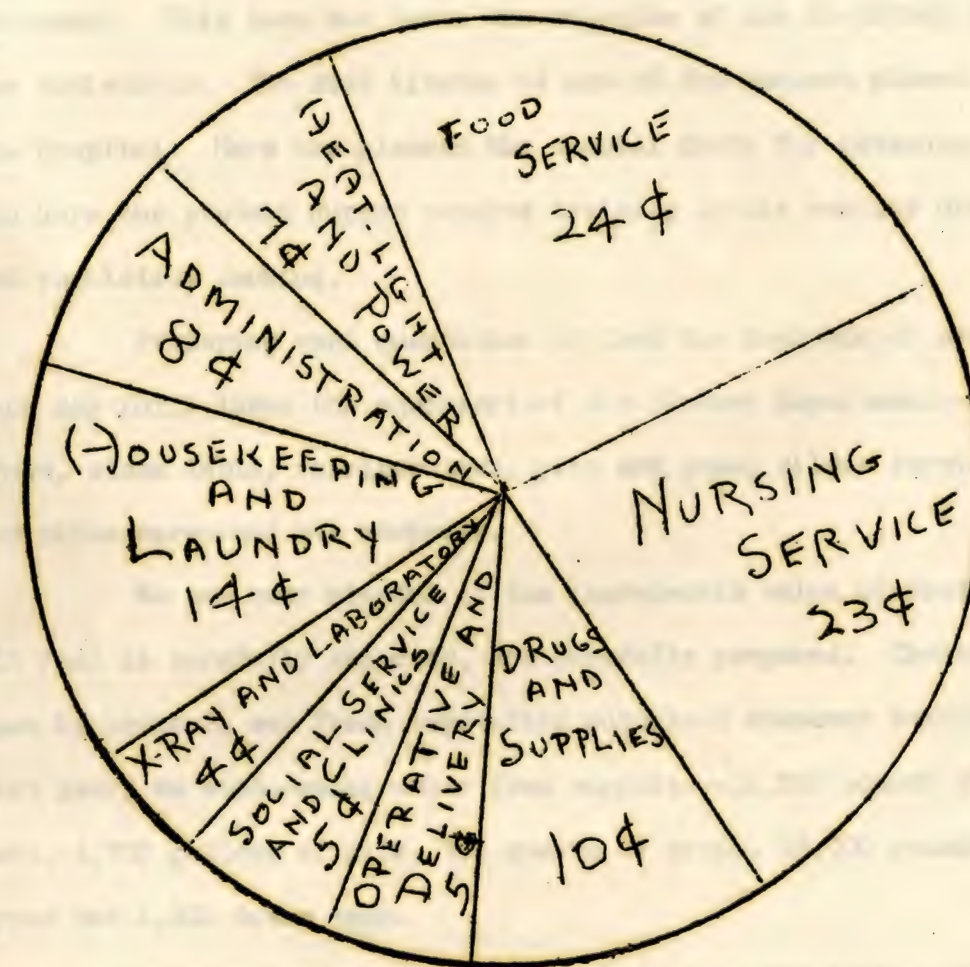
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1941	1942	1943	
\$2,342.80	\$1,898.14	\$1,852.19	VALUE OF CHARGES TO PATIENTS
\$3,737.88	\$3,140.65	\$2,647.12	Less Amount of Free Service
\$67,308.70	\$728,227.25	\$724,287.07	INCOME FROM PATIENTS
\$4,317.64	\$1,623.82	\$2,882.04	OTHER SERVICE INCOME
			CONTRIBUTIONS:
\$0.00	\$12,000.00	\$12,000.00	Community Chest
\$0.00	\$3,000.00	\$2,000.00	City of New Orleans
\$288.34	\$44.19	\$27.08	Smoking
\$0.00	\$2,000.00	\$4,020.47	Illinois University
\$51,288.34	\$20,644.19	\$21,247.22	TOTAL CONTRIBUTIONS
\$82,342.68	\$160,222.26	\$185,719.66	TOTAL

THIS IS WHAT WE SPENT

1941	1942	1943	
\$0.00	\$0.00	\$0.00	TOTAL
\$2,077.43	\$4,804.26	\$6,243.19	OTHER PROFESSIONAL CARE
\$6,131.10	\$5,322.44	\$7,281.96	NURSING CARE
\$4,462.80	\$0,212.62	\$1,679.61	HOUSEKEEPING & PROPERTY
\$9,143.37	\$1,888.27	\$5,130.61	FOOD SERVICE
\$10,401.30	\$13,264.34	\$14,204.03	ADMINISTRATION

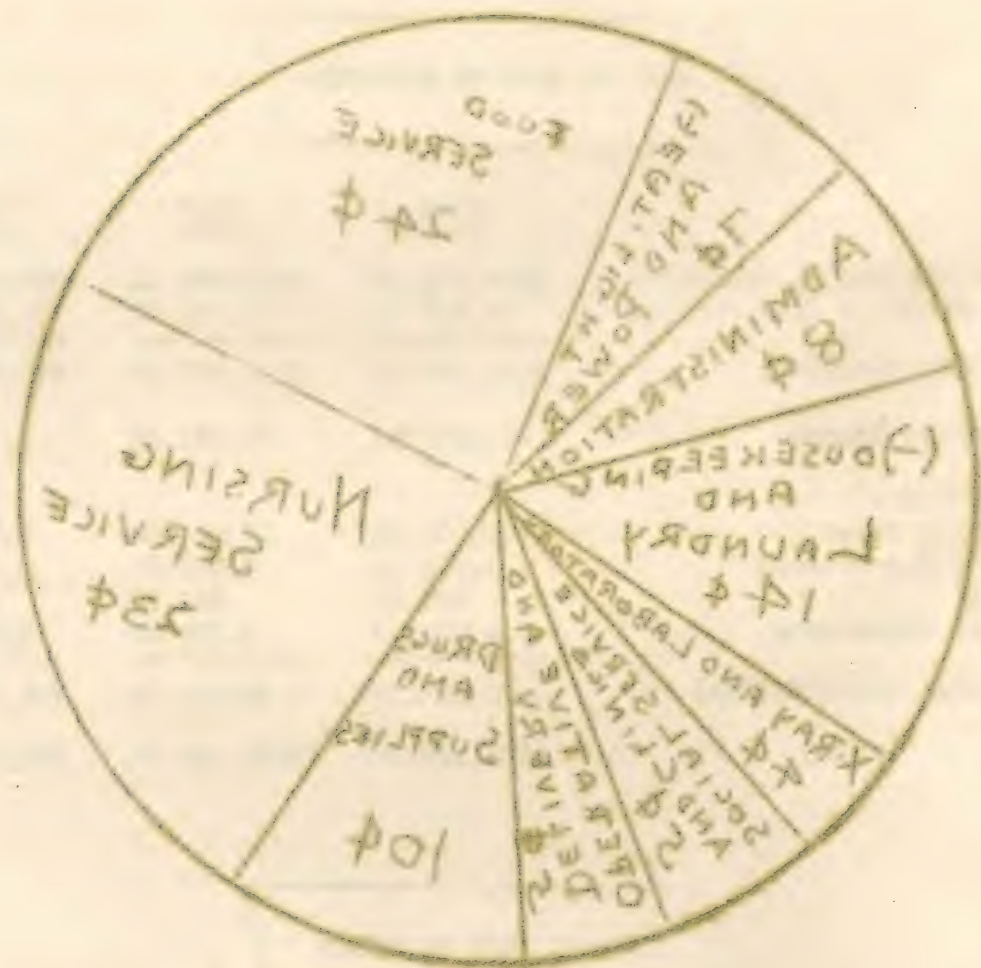
# WHERE DOES THE HOSPITAL DOLLAR GO?



The above chart shows how the hospital dollar was spent in 1944



# WHERE DOES THE HOSPITAL DOLLAR GO?



The above chart shows how the hospital dollar was spent in 1944

## CALORIES AND VITAMINS

The dietary department provided 165,000 well-balanced meals during the year to hospital patients, nurses and other personnel. This task has taxed the energies of our dietitian and her assistants. The diet kitchen is one of the busiest places in the hospital. Here are planned the special diets for patients, and here the student nurses receive training in the various diets and regulation cooking.

Preparing vast quantities of food for hundreds of meals each day fully taxes the equipment of the dietary department—stove, steam table, refrigerators, pots and pans, silver service and china ware—and our manpower.

We are ever mindful of the therapeutic value of food—all food is carefully selected, and carefully prepared. Choice meat is secured, and fresh vegetables purchased whenever available. Last year, we used—among other food supplies—31,000 pounds of meat, 5,700 gallons of milk, 750 quarts of cream, 16,000 pounds of bread and 4,000 dozen eggs.

Despite food shortages in markets here and there, our dietitian was able to make satisfactory adjustments and substitutions of her diets to cover all needs. The few articles that have disappeared from the market were not felt so keenly because of the abundance of substitutes. The pleased response of patients and personnel alike to our food service is in itself an accolade to our dietary personnel.



## SOCIAL SERVICE & CLINICS

One of the most important functions of the hospital is performed by the Social Service Department. The changed economic condition of our clinic clientele has made more active social service participation in the out-patient clinics necessary.

Clinic patients, last year, amounted to 7,135. They made total visits of 32,274—a decline from the figures of the preceding year. Despite this decline, close scrutiny had to be made of those who did apply, and adjustments were made in the scale of financial eligibility to meet the changing economic times.

Careful interviewing of patients is reflected in the reduced number of clinic cases, as well as a reduced number of free and part-pay admissions to hospital beds.

The Social Service Department participated in various wartime programs. They were particularly active in securing emergency maternal and child welfare service for many of our patients; it participated in various community projects sponsored by other hospitals, and the director served on various committees. Of particular significance was the appointment of one of the social workers as secretary for the Wartime and Reconstruction Service Committee sponsored by the American Association of Medical Social Workers. The director of the Social Service Department also served as lecturer in the Dillard University School of Nursing.

## CATERING AND VENTILATION

The dietary department provided 165,000 well-balanced meals during the year to hospital patients, nurses and other personnel. This task has taxed the energies of our dietitian and her assistants. The diet kitchen is one of the busiest places in the hospital. Here are planned the special diets for patients, and here the student nurses receive training in the various diets and regulation cooking.

Preparing vast quantities of food for hundreds of meals each day fully taxes the equipment of the dietary department—stoves, steam table, refrigerator, pots and pans, silver service and china ware—and our manpower.

We are ever mindful of the therapeutic value of food—All food is carefully selected, and carefully prepared. Choice meat is secured, and fresh vegetables purchased whenever available. Last year, we used—among other food supplies—11,000 pounds of meat, 5,700 gallons of milk, 77 quarts of cream, 16,000 pounds of bread and 4,000 dozen eggs.

Despite food shortages in markets here and there, our dietitian was able to make satisfactory adjustments and substitutions of her diets to cover all needs. The few articles that have disappeared from the market were not felt so keenly because of the abundance of substitutes. The prompt response of patients and personnel alike to our food service is in itself an accolade to our dietary personnel.



## WOMEN IN WHITE

Nineteen forty-four saw our average daily bed occupancy go up to 89.4—slightly higher than the previous year's average. The largest number of patients in the hospital any one day during the year was one hundred fifteen. Although the number of patients cared for was only slightly in excess of those cared for the previous year, problems of nursing service were greatly increased with the diminishing number of available graduate nurses. In order to alleviate some of these problems, we trained and employed a group of young women as nursing attendants. These women have proved very efficient, and work immediately under the supervision of the regular ward supervisors. In spite of a decrease in the number of available graduate nurses, and the consequent increased responsibility of the head nurses, some of the latter have gladly taken on the added responsibility of the teaching and supervision of the student nurses and volunteer workers.

### Nursing Education

The average person takes the hospital nurse for granted. When the hospital is mentioned, the vision of a spic and span white uniform immediately comes to mind. Very seldom is the person aware of the technical and specialized training the student must undergo before she becomes a graduate nurse.

The Division of Nursing of Dillard University offers a four and one-half year program leading to the degree of Bachelor of Science in Nursing. The students live on the university campus

## SOCIAL SERVICE & CLINIC

One of the most important functions of the hospital is performed by the Social Service Department. The changing economic conditions of our clinic clientele has made more active social service participation in the out-patient clinic necessary.

Clinic patients, last year, amounted to 7,135. They made total visits of 32,574—a decline from the figures of the preceding year. Despite this decline, clinic activity had to be made of those who did apply, and adjustments were made in the scale of financial eligibility to meet the changing economic times.

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### Nursing Education

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and receive their academic work at the university. The clinical or professional phase of the course covers the last two and one-half years. This experience is provided by Flint-Goodridge Hospital, Charity Hospital, and the Hume Day Nursery in New Orleans. Psychiatric nursing experience is secured at the Homer G. Phillips Hospital in St. Louis, and experience in Public Health nursing is gained through an affiliation with the New Orleans Health Department. The total enrollment in 1944 was one hundred four, twenty-three of this number being in the clinical phase of their work. All twenty-three are members of the United States Nurse Cadet Corps.

## WOMEN'S AUXILIARY

Women have cared for the sick and injured in the household for generations. Even today, when sickness invades the average home, it is the woman who assumes responsibility for the care of the patient, or, when necessary, prepares him for removal to a hospital. Today, hospitals more and more are taking over the care of injuries and illnesses which were formerly treated at home, and it is natural that modern women should take an active interest in hospitals.

Our Auxiliary was organized by Mrs. M. E. Burbridge and a group of public-spirited women soon after the opening of the new Flint-Goodridge Hospital building. Mrs. Burbridge served as president for nearly twelve years, retiring in 1944 to be succeeded by Mrs. Dixie Sanders Harney.

The object of the group is to be informed about the



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hospital activities, and to be good-will ambassadors for the hospital. Also—and not least—to render aid, provide service and funds to carry out some projects. All of this they do.

The funds raised by payment of dues, or by projects undertaken by the Auxiliary, do not go into the general fund of the hospital, but are the property of the Auxiliary, to be appropriated to such hospital uses as the Auxiliary directs.

Early in 1944, the Auxiliary made the following appropriations as its major projects for the year:

Surgical Instruments for Operating Room	\$200.00
Social Service Department for Drugs and Incidentals for Indigent Patients	150.00
Pediatric Department Renovation	75.00
Gas Range for Nurses' Residence	60.00

In addition, the Auxiliary sponsors the National Hospital Day celebration, and gives a Christmas party for the children patients in the hospital and for those registered in the out-patient clinic.

The Auxiliary does most of its work through committees. The Sewing Committee served at intervals throughout the year making gauze masks, instrument pan covers, surgical sheets, operating gowns, and did mending when necessary. The Workroom Committee was divided into many groups which came to the hospital weekly and monthly to fold surgical dressings. Chairmen of these groups are:

Mrs. A. V. Boutte  
Mrs. Elnora Hayes

Mrs. Varice Henry  
Mrs. Gaynell Porter

The 1944 membership drive was under the direction of Mrs. Daisy



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75.00	Incubators for Indigent Patients
50.00	Postnatal Department Remuneration
50.00	Gas Range for Nurses' Residence

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Mrs. V. H. Harty  
Mrs. G. H. Harty

Mrs. A. V. Harty  
Mrs. E. H. Harty

The 1944 membership drive was under the direction of Mrs. Harty

Meyers and Mrs. Mildred Sorrell. They did an exceptionally fine piece of work, bringing in the largest membership in the history of the organization—841 paid members.

The officers, executive committee, and committee chairmen are as follows:

Mrs. Dixie S. Harney, President	Mrs. M. E. Burbridge
Mrs. Daisy Meyers, Vice-President	Mrs. Ernest Cherrie
Mrs. Mildred Sorrell, Vice-President	Mrs. Maud Misshore
Miss Pearl Tasker, Secretary	Mrs. Eloise Thornhill
Mrs. Bernice Farley, Ass't Secretary	Mrs. Ruby Vandage
Mrs. Vivian Antoine, Treasurer	
Mrs. Hattie Mays, Hospitality Committee	
Mrs. A. S. Dejoie, Hospital Day Committee	
Mrs. Emile Meine, Sewing Committee	

#### Friendly Service - Congregational and Christian Churches

Another group of women, members of the Congregational and Christian Churches throughout the country, remembers us in annual benefactions of money, supplies, and hundreds of miscellaneous items needed by the hospital. These women have been thoughtful and practical in their donations. Packages have included such things as bed linen, table linen, toys for tots, bath robes for convalescents, games for the nearly-well, and layettes for the newly born.

Many of these gifts come from isolated and small congregations in many parts of the United States, from Maine to Texas, and from the State of Washington to Florida. Some of these things come as a result of weekly or monthly sewing circles; some as the result of church bazaars.



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Mrs. Daisy Meyers, Vice-President	Mrs. Ernest Christie
Mrs. Mildred Correll, Vice-President	Mrs. Maud Winkler
Mrs. Pearl Tarkenton, Secretary	Mrs. Elsie Thornhill
Mrs. Bernice Kelly, Asst. Secretary	Mrs. Mary Vandage
Mrs. Vivian Malone, Treasurer	
Mrs. Hattie May, Hospitality Committee	
Mrs. A. S. DeJoy, Hospital Day Committee	
Mrs. Edna Maine, Sewing Committee	

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### SOME PRESENT AND FUTURE NEEDS

Hospital equipment in constant use needs frequent replacement. Here are some of the things urgently needed at Flint-Goodridge to round out its service, and to meet the demands of a growing health consciousness on the part of our community:

AN X-RAY THERAPY UNIT ..... Cost ..... \$9000

We would be able to serve a large number of patients whom we must now refer to other agencies or to private laboratories.

THREE ELECTRICALLY-HEATED FOOD CARTS .. Cost ..... \$1500

At present, we serve food to patients from unheated carts. Too often, the last patients to be served do not get hot food. They cost \$500 each.

FIFTEEN OVERBED TABLES ..... Cost ..... \$ 600

Our service to patients in semi-private rooms would be improved if we had this equipment. They cost approximately \$40 each.

ONE ELECTRO-SURGICAL UNIT ..... Cost ..... \$ 600  
For Operating Room

TWO SAFETY LABOR BEDS ..... Cost ..... \$ 200

The beds are specially designed for women in labor. Cost is approximately \$100 each.

ONE HEAVY DUTY BREAST PUMP ..... Cost ..... \$ 100

TWO INFRA-RED LAMPS, each \$50 ..... Cost ..... \$ 100

TWO DRESSING CARTS, each \$100 ..... Cost ..... \$ 200

ONE ANAESTHESIA STRETCHER ..... Cost ..... \$ 110

ONE OPERATING ROOM SPOTLIGHT ..... Cost ..... \$ 200



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TWO INFRA-RED LAMPS	each \$50 Cost ..... \$100
TWO DRESSING CARTS	each \$100 Cost ..... \$200
ONE ANAESTHESIA STRETCHER	Cost ..... \$150
ONE OPERATING ROOM SPOTLIGHT	Cost ..... \$200

## SOME PERTINENT FIGURES

	<u>1941</u>	<u>1942</u>	<u>1943</u>	<u>1944</u>
<b>1. Miscellaneous Statistics</b>				
Births	359	560	527	649
Deaths	49	75	93	98
Percentage Post Mortems	9.3	13.2	46.9	34.6
Surgical Operations	1,008	1,048	1,351	1,427
X-Ray Pictures	3,141	2,470	2,035	1,872
Laboratory Tests	29,037	28,991	22,856	26,803
Emergency Patients	1,881	2,262	1,894	1,996
Average Daily Census	64.2	76.6	86.3	89.4
Per Diem Cost	\$3.59	\$4.30	\$5.19	\$5.99
Clinic Cost	37¢	41.5¢	48¢	70¢
<b>2. Hospital Patients</b>				
Workmen's Compensation	323	561	746	545
Crippled Children	95	74	48	8
Other Full Pay	561	762	1,134	1,809
Part Pay	424	723	931	546
New Born	348	543	514	631
Free	675	490	216	256
<b>Total</b>	<b>2,426</b>	<b>3,153</b>	<b>3,589</b>	<b>3,795</b>
<b>3. Hospital Patients by Services</b>				
Medicine	257	246	361	324
Surgery	1,135	1,503	1,314	1,288
Gynecology & Obstetrics	463	660	1,135	1,401
Pediatrics				
New Born	348	543	514	631
Other	223	201	265	151
<b>Total</b>	<b>2,426</b>	<b>3,153</b>	<b>3,589</b>	<b>3,795</b>
<b>4. Days of Care Given</b>				
Workmen's Compensation	3,022	4,663	6,942	5,954
Crippled Children	3,618	3,188	2,127	440
Other Full Pay	4,689	5,574	8,445	14,411
Part Pay	3,274	6,006	7,577	4,323
New Born	2,190	3,546	3,522	4,031
Free	6,651	4,907	2,370	3,497
<b>Total</b>	<b>23,444</b>	<b>27,884</b>	<b>30,983</b>	<b>32,656</b>



## SOME PERTINENT FIGURES

1941	1942	1943	1944	
<u>I. Miscellaneous Statistics</u>				
374	41.24	374	374	Clinic Cost
\$3.33	\$4.30	\$3.33	\$3.33	Per Diem Cost
64.2	76.6	64.2	64.2	Average Daily Census
1,881	1,881	1,881	1,881	Emergency Patients
29,037	2,262	29,037	29,037	Laboratory Tests
3,141	28,991	3,141	3,141	X-Ray Pictures
1,008	2,470	1,008	1,008	Surgical Operations
9.3	1,048	9.3	9.3	Percentage Post Mortems
42	13.2	42	42	Deaths
329	257	329	329	Births
<u>2. Hospital Patients</u>				
672	420	672	672	Free
348	243	348	348	New Born
424	271	424	424	Part Pay
261	1,134	261	261	Other Full Pay
92	74	92	92	Crippled Children
323	746	323	323	Workmen's Compensation
2,426	3,289	2,426	2,426	Total
<u>3. Hospital Patients by Services</u>				
223	201	223	223	Other
348	243	348	348	New Born
463	1,132	463	463	Gynecology & Obstetrics
1,132	1,314	1,132	1,132	Surgery
227	361	227	227	Medicine
2,426	3,289	2,426	2,426	Total
<u>4. Days of Care Given</u>				
6,621	4,907	6,621	6,621	Free
2,190	3,246	2,190	2,190	New Born
3,246	3,246	3,246	3,246	Part Pay
4,689	2,274	4,689	4,689	Other Full Pay
3,618	2,188	3,618	3,618	Crippled Children
3,022	4,663	3,022	3,022	Workmen's Compensation
23,444	27,884	23,444	23,444	Total

## 5. Individuals Admitted to Each Clinic

	1941	1942	1943	1944
General Medicine	4,720	3,855	3,274	2,643
Syphilis	1,645	2,073	2,532	2,053
Tuberculosis	204	222	73	64
Surgery	767	651	443	396
Dermatology	85	72	43	40
Pediatrics	766	945	746	631
Gynecology	431	329	182	170
Obstetrics	419	538	329	296
Urology	296	261	201	190
Ear, Nose and Throat	404	285	169	150
Eye	371	259	189	180
Dental	715	481	258	206
Special	1,715	619	210	116
Total	12,538	10,590	8,649	7,135

## 6. Clinic Visits

	1941	1942	1943	1944
General Medicine	8,082	6,279	3,794	2,629
Syphilis	28,397	28,181	40,426	22,127
Tuberculosis	1,154	1,065	347	179
Dermatology	340	206	187	105
Surgery	2,526	2,100	1,248	1,006
Pediatrics	2,180	2,814	2,856	2,052
Gynecology	1,504	1,086	443	416
Obstetrics	2,067	2,915	1,985	1,178
Urology	2,296	1,804	1,219	840
Ear, Nose and Throat	1,661	1,230	621	622
Eye	2,231	1,343	889	611
Dental	1,344	968	547	393
Special	1,720	619	214	116
Total	55,502	50,610	54,776	32,274

## 7. Average Days Stay

	1941	1942	1943	1944
All Patients	9.7	8.8	8.5	8.6
Workmen's Compensation	9.3	8.3	9.3	10.9
Other Full Pay	8.4	7.3	7.4	8.1
Crippled Children	37.9	43.0	44.1	55.0
Part Pay	7.7	9.3	8.1	7.9
Free	9.8	10.2	10.9	13.8



BOARD OF TRUSTEES

DILLARD UNIVERSITY

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E. J. LaBranche  
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W. W. Holmes  
Warren Kearny  
Miss Helen Kenyon  
Paul Quillian  
Loren H. Rockwell

Miss Fannie C. Williams

President of the University  
Albert W. Dent

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ADMINISTRATION

FLINT-GOODRIDGE HOSPITAL OF DILLARD UNIVERSITY

John L. Procope, Superintendent  
Alfred Lippman, Chief Accountant  
Miss Beatrice F. Alston, Director of Nursing Service  
Mrs. Bernice C. Farley, Director of Social Service  
Miss Vesta C. Hurley, Dietitian  
Mrs. E. Lyons Baker, Anaesthetist  
T. R. Williams, Pharmacist  
L. A. Johnson, Medical Records Librarian

HOUSE STAFF

Dr. W. J. Wheeler, Resident  
Dr. C. P. Dapremont, Intern  
Dr. H. G. LaBranche, Intern  
Dr. L. T. Reid, Resident  
Dr. C. P. Dapremont, Ass't Resident  
Dr. Wallace Capel, Intern  
Dr. G. W. Diggs, Intern  
Dr. Lula B. Stewart, Intern

19441943194219412. Individuals Admitted  
to Each Clinic

General Medicine	4,720	3,822	3,274	5,643
Syphilis	1,642	2,073	2,232	2,023
Tuberculosis	204	222	73	64
Surgery	767	621	443	396
Dermatology	82	72	43	40
Pediatrics	766	942	746	631
Gynecology	431	329	182	170
Obstetrics	479	238	329	296
Urology	296	261	201	190
Ear, Nose and Throat	404	282	169	120
Eye	371	229	189	180
Dental	712	481	228	206
Special	1,712	619	210	116
Total	12,238	10,290	8,649	7,132

3. Clinic Visits

General Medicine	8,082	6,279	3,794	2,629
Syphilis	28,297	28,181	40,426	22,127
Tuberculosis	1,124	1,062	347	179
Dermatology	340	206	187	102
Surgery	2,226	2,100	1,248	1,006
Pediatrics	2,180	2,814	2,826	2,022
Gynecology	1,204	1,086	443	476
Obstetrics	2,067	2,912	1,982	1,178
Urology	2,296	1,804	1,219	840
Ear, Nose and Throat	1,661	1,230	621	622
Eye	2,231	1,343	889	611
Dental	1,344	968	247	293
Special	1,720	619	214	116
Total	22,202	20,610	24,776	22,274

4. Average Days Stay

All Patients	9.7	8.8	8.2	8.6
Women's Compartment	9.3	8.3	9.3	10.9
Other Full Pay	8.4	7.3	7.4	8.1
Crippled Children	27.9	43.0	44.1	22.0
Part Pay	7.7	9.3	8.1	7.9
Free	9.8	10.2	10.9	13.8



